



Division of Fisheries & Wildlife

MassWildlife

Wayne F. MacCallum, *Director*

RENEWAL APPLICATION FOR PROBLEM ANIMAL CONTROL PERMIT

Pursuant to the provisions of Section 4, Chapter 131, of the Massachusetts General Laws, and 321 Code of Massachusetts regulations, part 2.14, I hereby apply for a license to control problem animals.

Name _____ Date of Birth _____

Address _____

City/Town _____ Zip Code _____

Organization or Firm _____
(If applicable)

Applicant's trap registration # _____

IMPORTANT: ATTACH PROBLEM ANIMAL CONTROL ANNUAL REPORT FORMS AND CHECKS PAYABLE TO THE COMMONWEALTH OF MASSACHUSETTS TO THIS APPLICATION. IF YOU NEED ADDITIONAL REPORT FORMS CONTACT THE PERMIT OFFICE AT (617) 626-1575.

Do you wish your name place on a list of permittees providing service? _____
If yes, what counties do you intend to service? _____

Have you been convicted of a violation of any provision of M.G.L., C.131 or of any provision of 321 CMR, or any Federal statute or regulation which is related to the intended activity within the past five years? No _____ Yes _____
If yes, please explain _____

I certify under penalties of perjury that I, to my best knowledge and belief, have filed all state tax returns and paid all state taxes required under law.

I further certify that the information provided above is true and correct to the best of my knowledge and belief.

Date

Signature of Applicant

www.masswildlife.org

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An Agency of the Department of Fish and Game

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